BEST AVAILABLE COPY

									Application or Docket Number					mber
PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998 GILLIANS														
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMAI		ENTITY	OR		R THAN ENTITY
FOR NU				ER FILED		NUMBER EXTRA			RATI	E	FEE	7	RATE	FEE
BASIC FEE											380.00	OR		760.00
TC	TAL CLAIMS		// minus 20=			= •			X\$ 9:	=		OR	X\$18=	-
INI	DEPENDENT C	LAIMS	minus 3 =						X39-		-	OR	X78=	/
MULTIPLE DEPENDENT CLAIM PRESENT								+130-			OR		-	
* If the difference in column 1 is less than zero, enter "0" in column 2								ı	TOTA	L		OR	<u> </u>	7/11
CLAIMS AS AMENDED - PART II										۱ -	<u> </u>	.	OTHER	THAN
(Column CLAIM						Column 2)	(Column 3)	_	SMAL	LE	ENTITY	OR	SMALL	ENTITY
ENTA	·	REM	AIMS AINING TER IDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	- /	0	Minus		20	=	ſ	X\$ 9=			OR	X\$18=	
AME	Independent	•		Minus	•••	3		Ī	X39=	1		OR	X78=	
H	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							ı	+130=			OR	+260=	·
									TOTA			OR	TOTAL	
Δ	(Column 1) (Column 2) (Column 3)								DDIT. FE	EL			ADDIT. FEE	
AMENDMENT (6		REM/	AIMS AINING TER DMENT		PR	HIGHEST NUMBER NEVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ŀ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. (<u> </u>	Minus	**	20	. —		X\$ 9=	I		OR	X\$18=	
AME	Independent FIRST PRESE	*	A OF MI	Minus	PENIO	3	=	ľ	X39=	1		OR	X78=	
				Elli CC DC	FIAD	CIVI ODAM		Γ	+130=	I		OR	+260=	
									TOTA			OR ,	TOTAL ADDIT, FEE	
	(Column 1) (Column 2) (Column 3)													_
AMENDMENT C		REMA AF	NIMS VINING TER DMENT		PR	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE
	Total			Minus	**	<u>20</u>	= Ø		X\$ 9=	Τ		OR	X\$18=	
AME	Independent	• 3		Minus	***	3	<i>- (</i>)	上	X39=	T		OR	X78=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+130=	t			+260=	
- H	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									╀		OR [TOTAL	
-	f the "Highest Nu The "Highest Num	mber Pre	viously Pa	id For' IN THIS	SSPA	CF is loss that	n 3 anlar *3 *		DIT. FEE				DDIT. FEE	
			y r ess	- w (1 mm Ot	p	unday o th	indian iniina		u ar ute e	·	ANNEX DOX	in com	मची १.	